

Lesson 55 - Prenatal Care For Better Infant And Maternal Health And Less Painful Childbirth

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1. Introduction

Approaches to pregnancy and childbirth have changed gradually through the ages. Primitive women went through their entire pregnancies with no problems. When the time to give birth arose, she merely went about it quietly and with little or no pain. There was no interference from anyone. The whole birth process took her away from regular life activities for perhaps a couple of hours.

As people became more "civilized" (in their diets and lifestyles), they began creating means of intervention—attending the processes of pregnancy, labor, and delivery "better than nature" could. One tribe of people is reported to have hung pregnant women upside down from a tree to scare the baby out. Another tribe had someone sit on a pregnant woman's belly to force out the child. These people had no understanding of the mechanics of labor and childbirth.

Man had a wonder and fear of childbirth as he had never observed it. He believed women possessed some sort of "power." Because of this, he eventually took charge of the entire birth process (from conception to birth) by interfering in its natural progression: Practices such as drugging during labor, Caesarean sections, forceps deliveries, drugs for various "complications" of pregnancy, etc., were ushered in.

Now there are even more devices to "aid" women through labor and delivery. Devices such as sonar sound, fetal heart monitors, etc., are very commonplace in hospital deliveries. You can even find out the sex of your baby ahead of time now.

Humans seem to have lost faith in nature and most do not believe that a birth can be natural. Most of us have little or no knowledge of the factors that create a normal pregnancy and childbirth. Pregnancy is regarded as disease to be treated. Women usually give birth in hospitals for the convenience of physicians. Physicians have long since discovered that interference in childbirth is an economic plus for them.

Despite all of this, there is a growing number of women (usually educated) that no longer patronize physician/hospital births. They are choosing homebirths attended by midwives or by their husbands alone. These women have a thorough knowledge of the mechanics of their bodies throughout the birthing process and also know that diet, exercise, etc., during preconception and pregnancy have much to do with how well the birth process will go and how healthy the child will be.

2. Preparation For Pregnancy—Preconceptional Care

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The quality of a child's life is determined before birth—it even begins before conception. A woman's body must be healthy prior to conception to insure proper development of the new being.

The prospective mother needs to exercise regularly, think positively, breathe fresh air, take sunshine, keep clean, get adequate sleep, and, above all, improve her diet at least six months prior to conception (if it is not already good). (However, any improvement in the diet at any time during pregnancy is better than no improvement at all.) The fetus will then develop in an already clean, healthful environment.

2.1 Fasting To Improve Baby's Future Environment

The best way to create an ideal fetal environment is to fast. It's sort of like cleaning your house before the arrival of a guest. A fast will enable the body to eject uneliminated toxins from tissues. Toxins may have been building up for years. Ridding the body of toxins causes better assimilation of foods and thus better nutrition. One long fast or a series of short fasts followed by a diet mostly of raw fruits with some vegetables, nuts, seeds, and sprouts will prove very helpful before and during pregnancy and lactation.

2.2 Improving the Diet

The best time to improve the diet is *before* conception. An all-raw diet following a fast will be less difficult to achieve than switching directly from a conventional diet to the Hygienic diet. But for some it is easiest to *gradually* eliminate meats, grains, processed and cooked foods, etc., and to eat more and more fresh fruits and vegetables as time goes on. Which way is chosen to improve the diet is less important than the fact that the diet is improved at this crucial tie.

2.3 Exercise

"The stronger the body, the more it obeys; the weaker the body, the more it commands."

—Rousseau

A woman's muscles need to be firm and well toned to allow for ease of delivery and less pain during the processes of pregnancy and childbirth. Starting an exercise program before conception, if not already on one, is essential. To start an exercise program during pregnancy when the body has been inactive prior to that time and the muscles are flaccid, could be dangerous.

Many women are accustomed to wearing tight-fitting clothing. Therefore their muscles haven't been used to support their internal organs as they should. Muscles, especially those of the abdomen, become flabby and weak when not used. These are the muscles to which most attention should be focused in preparing the body for pregnancy and childbirth.

Exercises such as sit ups, push ups, deep-knee bends, leg lifts, and yoga postures strengthen the abdominal, back, and leg muscles. These exercises should be as vigorous as the woman's physical condition permits. Start out slowly and gradually work out more and more and establish an exercising routine that works for you.

Many women suffer from lower back pain during pregnancy and labor. Had these women strengthened their spine and its supporting muscles prior to this time, this pain would not have occurred. These muscles will have the strength to support extra weight while pregnant if used regularly as they should be. (Note: the lower back is also a dumping site for toxins if the body is in a toxic state—exercise alone cannot alleviate back pain—a pure body is also necessary.)

2.4 Effects of Birth Control Pills, IUDs, and Abortions Prior to Conception

Women should not conceive immediately after stopping use of birth control pills or after the removal of an IUD because this can pose danger to the fetus. Prior abortions, which stress the woman's reproductive organs, also pose danger to future fetuses. They can cause babies to be born prematurely.

The body needs a housecleaning to prepare for the fetus. Fasting, followed by a proper diet and other life essentials will prepare the body for the incredible feat of pregnancy and birth.

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3. Care During Pregnancy

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Women are convinced by the media, their physicians, relatives, etc., that prenatal care means going to the doctor for regular checkups. Frequent examinations are required by physicians to check for sugar in the urine, blood count, edema, etc. These "complications" are considered by conventional standards to be normal and therefore need to be checked for. Instead of avoiding these complications by right living, these abnormalities are tested for throughout pregnancy. What women are not told is that all these tests (especially vaginal exams) are very enervating and should be avoided and, in fact, visits to physicians are not only needless but fraught with many dangers for both mother and progeny.

We are told that only an uneducated, ignorant woman would neglect visiting an obstetrician regularly during pregnancy to make sure everything is going okay. But why wouldn't everything be okay? These obstetricians are trained to treat pregnancy as a disease rather than the normal and natural condition that it is.

The medical establishment conducts many tests on pregnant women to discover trouble only after it is developed. They have no ways of guiding women to health—they deal with pathological effects, not causes. Normally, physicians utilize drugging, which adds to the harm, to "remedy" the "problems" they purport to discover with their tests.

Prenatal care, however, does not mean visiting your obstetrician at all. It means providing the healthful conditions so as to produce and maintain better health and development in the unborn child. In other words, the child is very much so "at the mercy of the mother" for all the requisites of development and growth and freedom from harmful toxins. As Dr. Shelton says, "the child's needs are best served when those of the mother are perfectly supplied."

Prenatal care includes wholesome outdoor exercise, pure air, rest and sleep, sunshine, freedom from worry or anxiety, absence of overwork, and most importantly, proper food. The unborn child is totally dependent upon the mother to provide these things prudently.

Pregnant women need not eat more food than they did prior to pregnancy as is commonly asserted. They need only eat the best of foods—raw fruits, vegetables, nuts, and seeds. These foods will provide an abundance of minerals, vitamins, and high-grade proteins for both mother and baby. Good foods are the raw materials for better eyes, better bones, better teeth, a better nervous system, a better brain, and better development all around the baby. Proper foods also improve the health and comfort of the mother and allow, for greater ease in delivery and healthier nursing.

Good food is not enough, however. A pregnant woman must secure the best conditions for efficient utilization (assimilation) of her food. She must observe food combining rules, eat only when hungry, never overeat or eat when emotionally upset or physically tired, never drink with her meals, etc.

"Well-nourished mothers (this does not mean overfed) give birth to well-nourished and, therefore, well-developed and vital children. Not merely the bones and teeth and respiratory organs are involved in the results of adequate or inadequate diets, but every tissue in the body is weakened or strengthened, as the case may be, by the mother's food. Mother's nutrition is the real prenatal influence." — Dr. Herbert M. Shelton, *Hygienic Care of Children*

3.1 Proper Diet

The best diet for a pregnant woman (and, indeed, for everyone) is that which has a proper balance of carbohydrates, fats, and proteins. This can be obtained by eating a variety of mostly raw fruits with some vegetables, nuts, seeds, and sprouts. In eating this diet, the pregnant woman provides her baby with all the mineral salts, vitamins, and other food elements necessary for its proper growth and development.

The mother to be must also make sure she combines the foods according to food combining rules (no fruits with vegetables, no proteins with fruits, no starches with proteins, etc.) so she will assimilate the nutrients in these foods most efficiently and place the least burden upon her digestive facilities. Also, eating in an atmosphere of peacefulness as opposed to upset, in a well-ventilated environment, and in moderation are very important factors in proper nourishment.

Although most people will strongly advise against fasting while pregnant, it can be advantageous to both mother and baby to undertake a short fast (one to three days) during the early months of pregnancy. Many women, at this time, experience some form of nausea and discomfort and loss of appetite. This is not due to her pregnancy, but to her toxemic state. Needless to say, when there is no appetite, no food should be taken. Nature knows best and attempts to put the physiological house in order causing the pregnant woman discomfort and lack of appetite. A few days of fasting should restore comfort to the mother and enable her to eat without distress. Many people will tell the mother that harm will come to her baby and to her if she does not eat plenty of "good nourishing food" at this time, but what will she gain if she eats when she is nauseous and then ejects the food as soon as it is eaten? (See section on complications in pregnancy.)

A long fast during pregnancy, however, is not recommended. The fetus is growing and obtaining nourishment from the mother and can only go so long before deficiency will result.

Short fasts give the body a chance to adjust to the pregnant state. They allow the organs to rest and cleanse themselves to prevent abnormality of the fetus. Short fasts improve assimilation and utilization of nutrients from the food taken following the fast. Fasting also improves metabolism which makes nutrition more complete, not only in the intestinal phase, but also when it reaches the cell of the fetus.

3.2 Items To Avoid While Pregnant

While it is true that eating fresh, raw fruits and vegetables will have a positive influence on the health of the offspring; it is also true that consuming unnatural and toxic substances such as drugs, coffee, alcohol, fluoride, salt, vinegar, condiments, preservatives, processed foods, etc., will have a detrimental effect. These items, and more, must be avoided if optimum health is desired, for one's child.

3.3 Drugs, Alcohol, and Cigarettes

More and more young women drink alcohol and coffee, smoke cigarettes, and eat junkier foods than in the past. Along with this fact the number of unhealthy and defective babies born each year increases.

Many studies have been conducted in recent years that indicate the harmfulness of alcohol, drugs, and cigarettes on the unborn baby. It is known that even moderate consumption of alcohol—in fact, even one drink—can have an effect on the fetus. Severe birth defects have been caused by alcohol consumption in

pregnant women. Some babies are born with "fetal alcohol syndrome"—that is, they have shortened features, a pugnacious cast to their faces, and their eyes are very close together. Spontaneous abortion, smaller than normal babies, very small head size, mental retardation, complications of pregnancy (see section on this), and a broad range of other adverse effects are caused by alcohol consumption.

The placenta, which supposedly filters out harmful substances ingested by the mother, does not filter out drugs, alcohol, tobacco poisons, caffeine, spices, etc. This is why it is imperative that these substances be avoided by pregnant women (and everyone).

Smoking while pregnant causes a baby to be smaller and weaker. The smoke in the mother's bloodstream prevents oxygen from getting through to the fetus. Thirty-five percent of premature births (terms of eight months or less) are from smokers. Also, babies born with weights of less than 4.3 pounds are almost always from smoking women. Physicians, in many cases, merely warn their pregnant "patients" to cut down on cigarettes rather than to cease them completely. The same is true for alcohol.

An example of how deadly drugs can be is as follows: in the 1950s and 60s, a drug called thalidomide was marketed. It was frequently prescribed to pregnant women to help them to sleep. Not only did it not help them to sleep; it also caused them to prickle, perspire, tremble, vomit, become giddy, lose feeling in their extremities, and worst of all caused their babies to be born with severe deformities. Thalidomide babies were often born with seal-like flippers for arms and legs among other deformities. Seven thousand of these defective babies were born before the drug was removed from the market.

This is just one drug, however, amongst the myriad of drugs that has been, and still is being, prescribed to pregnant women to remedy a variety of symptoms ranging from morning sickness, eclampsia, etc., to sleeplessness, nervousness, etc. All drugs are harmful to everyone who takes them but even moreso to an unborn child.

Various parts of the fetus' body are formed at different times during pregnancy. For example, the nervous system forms 15-25 days after conception; the limbs 24-36 days after conception; the heart 28-45 days after conception; the fingers and toes 36-42 days after conception; and the ears and nose at 29-45 days. A drug taken at any one of these stages of development can cause defects of varying degrees to the body part that is developing. "Medicines," tranquilizers, X rays, insecticide sprays, exposure to smog, etc., are all very harmful to the fetus and should be avoided as much as possible.

A recent test conducted on 3,528 drugged (anesthetics, pain relievers, tranquilizers, muscle relaxants, etc.) pregnant women proved that children born of these women were slightly to severely mentally retarded. They lagged in language and learning skills. Their perception and memory were below normal and their judgments were faulty.

Physicians, in spite of the results of this test, say that the FDA is stringent in its protection of pregnant women. They claim there is not one nonprescription drug that has adverse effects on the fetus. (What about aspirin?) It is also claimed that obstetricians will not prescribe drugs that are harmful to baby. Yet they prescribe all of the drugs that have proven harmful in the above-mentioned test, oftentimes just to "keep a woman happy" without warning them of the possible "side effects" of the drugs. Remember: all drugs are very harmful to the unborn child. Drugs never produce health—only untoward effects.

3.4 Coffee and Other Caffeinated Beverages

A study conducted by the FDA has found that caffeine causes birth defects. This drug is found in coffee, teas, soft drinks (mostly colas), chocolates, and in numerous over-the-counter drugs. Most of these items are routinely consumed during pregnancy.

3.5 Fluoride and Salt

Physicians tell many pregnant women that the fluoride put into our drinking water will prevent future dental caries in their offspring. They're told to drink much of it while they're pregnant for this reason.

However, these same physicians admit that if these women drink too much of it, it will cause mottling of the child's teeth. But how much is too much? I'll tell you—any amount. Pregnant women should drink only distilled water and that only if they are thirsty. Fluoride is poisonous and cannot be helpful to anyone. We cannot be poisoned into health.

Salt is poisonous, but especially for pregnant women and their fetuses. Edema is attributed to a high salt intake. This problem is very common in pregnant women in this country as the salt intake is incredible—salt is in almost every processed or prepared "food." But if only fresh, raw fruits and vegetables are eaten, there will be no problem with ingesting salt that is harmful to both mother and child.

3.6 Processed Foods

Pregnant women are advised to drink pasteurized milk to insure they get enough calcium for their babies bones and teeth formation. Pasteurization (boiling) is, however, just another form of processing that destroys food elements. Therefore, a woman drinking pasteurized milk thinking she is getting adequate calcium and vitamin D from it is being deceived and is depriving her child of much needed nutrients. Adults do not have the digestive faculties to get calcium from milk for it is bound in the indigestible protein complement, casein. If the milk is pasteurized, it becomes unusable due to heat derangement.

Many pregnant women are also told by their obstetricians that they should give in to their cravings—pamper themselves. They eat such abominations as cakes, pies, ice cream, pickles, candy, canned fruits and vegetables, etc., all jumbled together in a haphazard way which causes both mother and baby to be undernourished. Being filled up on these harmful foods which contain preservatives, additives, food colorings, salt, sugar, white flour, etc., a woman is no longer hungry for those foods she should be eating for adequate nourishment. Processed sugars and refined white flour and rice rob the body of calcium and other nutrients that are so greatly needed during this crucial time. The body must surrender its previous supplies of minerals and nutrients to metabolize these denuded products.

In tampering with the foods nature intended for us, man has succeeded in destroying the natural balance of his diet. But these food indiscretions are not the only causal factors in the lack of health that is so prevalent in our modern times. Such factors as foul air, polluted waters, lack of exposure to the sun, lack of exercise, lack of sleep and rest, living a fast-paced life, taking drugs and stimulants, overworking, domestic inharmonies, economic strife, etc., are also contributors to much disease common today—including the birth of many unhealthy and inferior children.

3.7 Overeating and Weight Gain

Despite the fact that most women have increased appetites during pregnancy, food intake should not be increased. The greatest weight gain during gestation should be about 20 pounds. The pregnancy itself (fetus, placenta, amniotic fluid, enlargement of the uterus and breasts) weighs only about 15 pounds. Anything in excess of this is merely fat which will be difficult to remove later. This extra weight can harm both mother and the baby. It causes an increased risk and a more difficult delivery. In fact, a group of midwives in Austin, Texas, will not take on clients that are overweight for this reason. They're left for the obstetricians to handle in a hospital setting and labelled as high risk.

During gestation, a woman must exercise willpower and common sense when eating. Keep meals simple and never eat between meals. Keeping meals simple means to have not more than a few items of food at once, eating them plain—no additions such as salt, condiments, oils, margarine, butter, etc., and mostly raw.

When pregnant, all of the internal organs are "squeezed" by the growing fetus inside. For this reason, it is even more imperative not to overeat or eat foods difficult to digest or eat too often as this can cause constipation. Constipation plagues many pregnant women who, instead of complying with the aforementioned, rules, take laxatives (X-lax, herbal teas, etc.), eat bran, or give themselves enemas. These are all taxing to the system and should be shunned.

Part of the reason that a woman on a conventional diet eats so much more when she is pregnant is because this diet is deficient in most elements essential to the normal growth of the fetus. She eats more in an effort to meet the body's demands. This is unwise. It is best to eat of Hygienic fare in moderate amounts for a healthy fetus (and mother).

Other troubles overeating and wrong eating cause are morning sickness, indigestion, hemorrhoids, swollen ankles, varicose veins, overdistension of the abdomen, a fat baby, and a difficult delivery. Restricting the diet, rather than overfeeding prevents postnatal hemorrhage so common in overweight women, who have a very toxic condition.

3.8 Exercise and Work, Stress

It is very important for a pregnant woman to get regular and systematic exercise. This is to insure muscle tone, elasticity, and stamina for the marvelous upcoming event (childbirth). However, it is unwise to undertake a strenuous exercise program such as horse-back riding, tennis, motorcycling, etc., while pregnant unless it was indulged before pregnancy. If a woman was, however, not much of an exerciser prior to pregnancy and wants to obtain optimum health for herself and her unborn baby, it is still possible for her to incorporate exercise into her daily life. These exercises should be taken up gradually. Exercises that are not very strenuous such as walking in the open air and sunshine or swimming are recommended.

There are a wide variety of books on the market that are very good for pointing out specific exercises for pregnant women. These may include prenatal yoga or other stretching formats that strengthen the area of the body that will be put to use during labor—the abdomen and back. Exercises that helped me when I was pregnant are leg lifts (tightened abdomen and back muscles), deep-knee bends, and kagels.

Whatever exercises a woman in gestation chooses to undertake are okay so long as she remembers to do them regularly rather than sporadically. If she exercises only occasionally, she will more likely end up with sore muscles rather than benefits. Some women claim that their ritualistic schedule of exercise achieved painless childbirth for them.

Without exercise, abdominal muscles (and all muscles) will be lax (atrophied) and will be unable to support the womb and its appendages. A very common cause of aborted pregnancies is the debility of the mother. It takes strength to carry a child and to bring it into this world and proper nourishment alone will not provide it.

Exercise improves circulation and thus there will be a greater supply of nourishment to the fetus. This, in turn, will produce a more well-developed child. It will also provide the mother with stamina during labor.

If a woman is working during pregnancy (employed), it's fine to work right up until the last day before birth if in reasonably good health and if she wants to. However, sit-down jobs can contribute to backaches (toxins settle in the lower back when sitting a lot). Sit-down jobs also prevent a woman from getting the proper exercise, fresh air and sunshine she needs to be healthy. If a woman has a sit-down job however, she should try to get up and move about regularly and to get outside whenever possible and walk in the open air.

Avoid jobs that require overwork (overtime, few breaks, etc.) as a pregnant woman needs much rest and relaxation also. A job that is very stressful should also be avoided. Stress affects your mental state which can injure the child to the extent that it impairs nutrition and thus causes a supply of faulty nutriment to reach the fetus.

3.9 Rest and Relaxation, Sleep

Rushing about doing this and that is not necessary and can be harmful, especially while pregnant. Taking the time to rest when fatigued or to relax regularly instead of pushing oneself is very necessary. The

human body assimilates nutriment' better when in a rested and relaxed state as opposed to a nervous, rushing state which produces indigestion and other problems.

In our modern world, many people truly do not know how to relax. We need to learn how. During pregnancy is a good time to learn as during labor is too late. Regular practicing of relaxation techniques while pregnant will prevent tenseness during labor which is a major cause of pain and tearing of the perineum.

A definite figure as to how much sleep a pregnant woman needs is as fallacious as is a set amount of vitamins and minerals that are necessary. Each individual's needs are different. If a pregnant woman eats well, rests and relaxes regularly, exercises, and has little or no stress in her life, she will need less sleep than one who eats wrong foods, overeats, has a stressful job, is nervous, etc. The amount of sleep a woman needs while pregnant is generally no more than she needed prior to pregnancy. However, she may tire more easily in the last months of pregnancy as there is a greater strain on her body. A mid-afternoon nap is very helpful.

3.10 Supplements and Deficiency Diseases

Most obstetricians recommend that pregnant women should take calcium and iron tablets and other supplements to assure proper growth and formation of bones and teeth and to prevent anemia in the mother. They also say that women have an increased vitamin need now that there are two instead of one and therefore should supplement the diet. This is a fallacy. First of all, if the woman is eating adequately of proper foods she will not need any "extra." Secondly, humans are not able to utilize inorganic minerals. Taking unnatural supplements can only cause extra strain on the mother for she will have to eliminate these toxic substances.

Milk is often used as a supplement during pregnancy. Women are told to drink preposterous amounts of milk to get their calcium. They are scared into drinking it by doctors who tell them quite correctly that calcium will be taken from their bones and teeth if not in adequate amounts in their diets. This is true, but she will not obtain proper calcium from milk. As mentioned earlier, most milk is pasteurized and therefore deranged.

Also, humans lack the enzymes, lactase and rennin, to properly digest and utilize milk even if it is raw milk, and the calcium in cow's milk has been known to absorb the finer calcium in human cells thus making it harmful rather than helpful. (See Lesson 33 for details on the harmfulness of milk consumption.)

Calcium tablets are also taken in abundance by pregnant women. These are harmful rather than helpful. They produce acidity and actually rob the body of calcium. They thus help to produce osteoporosis and osteomalacia.

A deficiency of calcium in the pregnant woman's body causes her child's bones and teeth to be malformed and weak. The child may later have dental caries, crooked teeth, etc., throughout life as a result. However, a deficiency of calcium is not due only to a lack of calcium in the diet but to poor assimilation and utilization. This may be caused by overeating, eating of wrong combinations of foods, etc., that impairs digestion and absorption from the intestinal tract. It may also be due to the faulty action of the body in general (general poor health) and the various organs in particular that handle this particular element. Also, adequate sunshine is necessary to assist in calcium metabolism. It is not how much calcium that is contained in the foods one eats, but how much is absorbed and retained that counts.

For those who do want to make sure the foods they eat contain calcium, here are some foods that have large amounts of it: fruits, cabbage, lettuce, green leaves, nuts (almonds), figs, asparagus, kohlrabi, etc. Also, Dr. Shelton in his book, *Hygienic Care of Children*, says that orange juice (fresh-squeezed) helps the body to retain calcium and phosphorus and to assimilate nitrogen (protein).

The fetus stores a calcium supply in its tissues. It can draw upon this supply at a later time. During the

first months of pregnancy is when it is most crucial for a pregnant woman to obtain and retain adequate calcium for her and her baby's health.

Another mineral that most people tend to be fanatic about while pregnant is iron. A lack of iron causes anemia. Anemia is a deficiency disease with symptoms of lack of red blood cells, a pale complexion, nervousness, night sweats, and susceptibility to disease. It is not infrequent that pregnant women become anemic. This is because of improper nourishment and the inability of their bodies to use nutriment.

A lack of proper food or the inability to assimilate food leads to a gradual decline of the body's power to produce red blood cells. This is caused by imperfect nutrition—a lack of food iron or impairment of the digestive processes.

A short fast (one to three days) helps to rejuvenate the blood and the body's ability to assimilate more so than to merely eat more iron-rich foods. Daily sun baths, exercise, and fresh air also help. Doctors recommend iron pills and eating lots of liver. Needless to say, these will not help but can only harm for they are inorganic and poisonous.

During a fast, red cells continue to drop and then new red cells with regular edges form (in the case of anemia). If wary of undertaking a fast at such a time, a pregnant woman should consult a professional Hygienist or someone else familiar with fasting.

Red cell count is tested by medics with a test called the hematocrit. When I was pregnant with my second son, I submitted to this test out of curiosity. My hematocrit was much higher than the other women that were tested at this clinic. My diet was mostly raw fruits with some vegetables and grains.

When I told the doctor this, he recommended I start taking iron tablets. He completely ignored the test results. These other women were doing everything he recommended (eating lots of iron-rich foods—organ meats, legumes, beets, etc., and taking iron tablets), and they were diagnosed as slightly anemic. You think that would've told him something!

If you eat a proper diet, you will have no problem meeting iron needs. There is no need to dwell on iron needs, or on any one nutrient. All of our needs are met by an adequate diet as mentioned earlier and all other essentials of life.

3.11 The Placenta

Mother's placenta does not magically extract only those good and necessary nutrients that mother gives. It also absorbs harmful substances. Most things mother takes in through the lungs, digestive tract, and skin show up in cells and tissues of the growing baby. These toxins irritate the newly-forming cells.

These toxins may just pass through the baby, or they may cause injury such as a birth mark or a major organ failure or some other injury. Drugs, environmental hazards, food additives, etc., interfere with organ development and can cause so-called congenital anomalies or birth defects.

In 27% or more births, defects occur and are continuously increasing as more and more chemicals enter our environment. Everything from drugs to additives in foods, sweeteners, aerosol sprays, car exhaust, pesticides, household cleaners, etc., are as harmful to the unborn child as they are to everyone.

Don't take risks even though so and so didn't take care of herself and still had a normal baby. However, it doesn't help to be afraid of or fanatical about the possible hazards in our environment as the baby can pick up on your fears. It is best to avoid as many hazards as you possibly can and don't worry as you can't control all of them. For example, don't use harmful pesticides or cleaning fluids in your home. Get plenty of fresh air in your home—open the windows. (It's best to live out in the country away from the pollution.) Try to avoid driving in heavy traffic. Eat organic fruits and vegetables when available. Don't eat *any* processed foods. These are just a few of the things a pregnant woman can do to avoid harmful substances from passing through her to the placenta and getting to her unborn child.

3.12 Sexual Relations While Pregnant

"A farmer who would not permit a stallion to worry his pregnant mares, will not hesitate to make regular sexual demands upon his pregnant wife. In this he is encouraged by his medical adviser, although it is the universal rule throughout nature that pregnant females will not receive the male. There are reasons to believe that coition during pregnancy is responsible for the coating of vernix caseosa (white, greasy substance on baby's skin) found on so many infants at birth and that frequent coition during pregnancy also adds to the pains of childbirth." — Dr. Shelton, *Hygienic Care of Children*

In modern times, most people do indeed indulge in sex while the wife is pregnant. Most people feel there is no harm in this except during the last month when the baby is almost ready to enter our world. According to Dr. William Esser, a normal woman will discourage sexual union when pregnant because her instinct is against it. He also says that the entire animal kingdom frowns upon sex during gestation, and the pregnant female will defend herself against such a travesty.

Sex during pregnancy can cause the woman's procreation organs to become congested with blood. This is dangerous to the fetus as it can cause abortion. Oftentimes the initial signs of abortion are present after sex, but because the mother is of strong constitution, she will continue to carry the baby. Other problems caused by the uterus being congested with blood are that of an apathetic child or a congenital idiot being born.

3.13 Preparing for Childbirth—Classes

Nowadays childbirth preparation classes are very common. They may be conducted by a group of midwives or by hospitals or clinics. These classes may teach natural and/or unnatural methods of childbirth.

One thing most of these classes have in common though is that they give parents-to-be some knowledge of the physiology of pregnancy and childbirth. Stages of fetal growth are displayed. Parents are given an understanding of what is and will be occurring within a woman's body and how to deal with these changes.

Many classes (those given by hospitals and clinics that are medically oriented) teach parents which drugs will be available to them when the woman is in labor. They teach students what to expect when entering the hospital.

Taking childbirth preparation classes can be very advantageous choice for many parents to be. However, they are unnecessary. Reading the many excellent books and magazines (especially those with illustrations) that are available in libraries and bookstores as well as talking to other parents you know who have undergone homebirths is adequate for many. Knowledge of the mechanics of pregnancy and childbirth is definitely a necessity for those (and everyone) who plans a homebirth. I've found classes conducted by unorthodox (not medically oriented) midwives to be very helpful. I met other couples who planned to have midwife-assisted homebirths and we provided moral support for each other.

3.14 "Complications" of Pregnancy

This section should really be called "Abnormalities of Pregnancy" as there are no complications if care is taken to produce health. However, I will call them complications as a large percentage of women do experience some of them.

"The unborn child is a parasite feeding upon the substance of the mother. If the mother's substance is physiologically, chemically, and magnetically correct according to nature's plan, the process of gestation is a comfortable and physiologically ideal experience. If there is in

the pregnant woman a chemical imbalance—in other words, if the woman is toxemic—there comes sooner or later a physiological protest accompanied by an attempt toward correction of this abnormal state. Hence the reaction, the nausea and vomiting." — George S. Weger, M.D., "The Nausea and Vomiting of Pregnancy," *Dr. Shelton's Hygienic Review*

There are many things that can go wrong during gestation if a woman is not in optimum health. Morning sickness, heartburn, constipation, vomiting, digestive difficulties, edema, eclampsia, varicose veins, breast pain, back pain, toxemia, etc., are some of the common complications. But pregnancy, being a normal physiological process, should not be accompanied by any discomfort or abnormal state.

It seems that most women when pregnant suffer from morning sickness of varying degrees (because of the many transgressions from the ideal lifestyle). For some, it is intense and lasts all day. They may vomit to the point of not keeping any food down. This is caused by a reaction to toxic saturation from eating wrong foods. It can be corrected by a short fast. Most physicians, however, prescribe drugs and other manipulations which are harmful to both mother and baby. They specialize in relieving symptoms and treating effects.

Some women who have milder cases of morning sickness (gastric uneasiness) experience slight nausea and lack appetite. These may feel relieved after eating a heavy, cooked meal while feeling nausea after eating fruit or nothing at all. These women then blame the fruit for their nausea. This is obviously not so. The heavy, cooked foods deaden or stop eliminations and fruits or fasting allow the body to start housecleaning, which frequently has unpleasant symptoms.

The reason a pregnant woman feels nauseous in the morning is because she's been fasting since the night before. This fast has allowed her body to recuperate vitality and to eliminate toxins.

"There is a rebellion in the stomach; it rejects food. The liver speeds up its excretory function. Much bile is regurgitated into the stomach and is vomited. There may even develop a psychic revulsion to food, so determined is the organism to have its way and to clean house. If we can once understand that nature is trying to provide a clean house in which to evolve the new life, we can understand the need to cooperate in the work and not to throw monkey wrenches into the vital machinery." — Dr. Shelton, *Fasting Can Save Your Life*

Another common "complication" of pregnancy is toxemia. Toxemia is marked by a rise in blood pressure, undue weight gain with puffiness, headaches, and visual disturbances. Albumin (a water-soluble protein) is present in the urine. Toxemia in pregnant women results in malnutrition and poisoning of the fetus leading to difficulties later in the child's life if allowed to go on. Again, a fast will remove toxemia.

Many pregnant women experience eclampsia which is a form of toxemia. It usually occurs in women who gain over thirty pounds in weight during gestation. It has been observed in a study by Dr. Dieckman in the *American Journal of Obstetrics and Gynecology* that eclampsia is much more prevalent among people who eat high-protein, high-fat diets. Dr. Dieckman noted that during the second world war in Germany there was a decreased occurrence of eclampsia because of a reduction of consumption of meat and other such "luxury" foods as butter, refined products etc. He also found that eclampsia is very uncommon in the tropics where a low-protein, high-carbohydrate diet is eaten.

Other studies have indicated that women who are overweight before becoming pregnant will most likely have a prolonged labor, possible caesarean sections, other maternal complications, premature birth of their child, and toxemia. A Hygienic diet does not cause this.

Still another study found that women who abstain from refined flours, beans, peas, grains, milk, butter, and cheese and eat only fruits and vegetables will have babies born softer and smaller than other women. This is good because labor will be less complicated—it is normal for babies' bones to consolidate after birth rather than before to ease labor and delivery. The small and soft baby will soon grow in strength after birth.

Another factor that most women consider to be a "complication" in pregnancy is if they are over the age of 30. This just is not so. If the woman has been taking care of herself prior to pregnancy, during pregnancy, and continues to do so, there will be no problems.

Another abnormality common in pregnancy is edema—retention of fluids in the tissues, in the case of pregnant women usually around the ankles. This fluid is used to hold the toxins present in the woman's bloodstream in suspension so they will do the least harm. This edema is a part of the protective functions of the organism of the pregnant women to keep the embryo from suffering with fluid retention and metabolic disturbances.

There is only one reason for any types of complications when pregnant, and that is that the "ills of pregnancy, as well as those of the nonpregnant state are each and every one, of toxic origin: and the reaction, the crisis, is nature's way of calling our attention to the matter so that we may help her and thus help ourselves." (Dr. George S. Weger, "Nausea and Vomiting of Pregnancy," *Dr. Shelton's Hygienic Review*.)

3.15 Other Information Pertinent to Prenatal Care

One factor a pregnant woman should keep in mind is to dress comfortably and attractively in cotton clothes that are loose—not tight. Don't wear tight clothes such as garters, girdles, tight stockings, pants, etc. Wear flat shoes as high heeled shoes will put a strain on your back. They are also dangerous as you can fall easily or get them caught on things, etc.

Women, when pregnant, should take time to take walks out in the open air and sunshine so as to provide two of the essentials for themselves and their unborn babies. This also provides a time when the mother-to-be can find solitude and think about the new being inside of her and what he or she will be like.

It is wise to avoid any lengthy traveling while pregnant. This is generally when a woman feels like "bedding down" and being stable anyway—a time to feel a sense of security in her life. Traveling by car for long distances does not allow her to stretch and use her body as it should be. Also, bumpy roads cause a great deal of discomfort to her at this time. Traveling by airplane is to be advised against especially in the later months of pregnancy. The extreme pressure and speed while flying can cause, among other things, labor to be brought on prematurely.

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4. Conclusion

There is much more that could be said about prenatal care, labor, and childbirth. I could go on for many more pages about all the complications of labor and delivery that are possible if a woman does not take care of herself during pregnancy.

Even if a woman has taken proper care of herself during pregnancy, it is still not over. She has to be very cautious who she selects to help at the birth. She needs to decide whether to have a homebirth or a hospital birth. She needs to have confidence in herself, faith that all will go well, and courage to accomplish the feat of birth instead of fear.

For example, if a woman gives birth in a hospital she is at the hands of the medical personnel there—she has, in a sense, given the responsibility of her child's birth to them. Much unnecessary medical intervention such as shaving of pubic hair, giving enemas prior to delivery, giving episiotomies, strapping the woman down during labor, drugging, forceps deliveries, Caesarean sections, etc., may

occur in hospitals—and those oftentimes for the convenience of the hospital staffs. All of these actions are enervating and harmful at a time when a woman needs to be at her best.

Providing the mother is in good health (normal), she will enjoy the actual childbirth experience and always remember it as a positive, enlightening experience. Giving birth in one's own home encourages this as the mother is surrounded by loving friends rather than by strangers. The baby will therefore enter a warm, loving world instead of the cold, antiseptic world of a hospital. No bright lights, masked strangers, spans on the buttocks, chemicals in the eyes, premature cutting of the umbilical cords, etc., will occur in the home. The father can share the first days of the baby's life with him/her and the mother. The mother will be with the child and be able to nurse the baby when he/she is hungry rather than by the clock. The mother will have more opportunity to sleep and relax after the birth as there are no rigid schedules as in the hospital. Also, there will be no displaced siblings as they will share the baby's first days also.

So you see, not only does the mother need to take care of her health, she needs to make the correct decisions regarding the coming event. She needs to be aware of the importance of proper preparation to prevent undue stress at the last minutes.

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5. Questions & Answers

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I am 30 pounds overweight, and I've recently started on the Hygienic diet. Although I'm gradually losing weight, it is a very slow process and I'm eager to become pregnant?

Excess in weight is usually toxin-laden fat that causes undue risks to both mother and unborn child. If you do get pregnant while overweight, try short fasts occasionally during the early months of pregnancy. Stick to Hygienic fare with lots of fresh fruit, and some green vegetables with very few nuts, seeds or avocados.

Of course, it is best to undertake a long fast (two weeks or more) before becoming pregnant and to realiment on juicy fruits and vegetables with very few that are high in fat and sugar content. If that is not possible for whatever reason, the next best thing is to eat moderately of only fruits and vegetables of low-fat, low-sugar content excluding nuts, seeds, avocados, and dried fruits, etc., until down to the desired weight. Your body will then be ready for the fetus.

I'm two months pregnant, and I've just found out about the Hygienic diet and am trying to stick to it. I've been a vegetarian for many years but am experiencing a mild case of morning sickness. What can I do to rid myself of this nausea?

Take a fast of three to five days—take nothing but distilled water and rest in bed as much as possible. Short fasts will do no harm to the fetus, they will merely help to eliminate toxins more quickly. You will no longer suffer morning sickness. After the fast, take raw fruits, vegetables, nuts, seeds, and sprouts, all properly combined to assure the best nourishment for you and your baby.

I'm pregnant and I live in an apartment in the city on a street with very much traffic. I don't open the windows often as I get strong odors of auto exhaust fumes from the street below. Is there anything I can do to improve my situation without moving which is not possible at this time?

Naturally, it would be best to live in a purer environment, but since that is not possible try purchasing house plants which will provide a rich source of oxygen in your home. Grow an indoor garden. Get a negative ion generator to help purify the air. Also, try to get out and exercise in the open air in the country or in nearby parks often.

I'm six months pregnant and just found out about the Hygienic diet. Is it okay for me to start on this diet from a conventional diet at this crucial lime?

It would not be good to all of a sudden just change your diet so drastically. You'd be sending so many toxins through your bloodstream at once that some of them could pass through the placenta and harm the baby. It is good to gradually eliminate harmful items in the diet, from the most harmful to the last harmful. Start with prescription and nonprescription drugs. Then stop eating red meats, then white meats, then fish, then dairy products, etc. Try to stay with each regimen for at least a week before eliminating another few items. This way you will be improving your baby's chances to be healthy even though you got a late start.

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Article #1: Joyous Childbirth, Hygienically by Ralph C. Cinque, D.C.

The process of giving birth is a normal, natural and largely spontaneous activity that shares many similarities with the process of defecating. I make this rather crude comparison not to be needlessly distasteful, but rather to emphasize the point that giving birth is as physiologically ordinary as having a bowel movement. Granted, it is inherently more demanding, more prolonged and more intense, but under normal conditions it is just as certain in its outcome. It calls upon many of the same muscles that are required to defecate. It occasions sensations that are very much like the urge to defecate.

If this is true, why has childbirth become such a traumatic, painful and debilitating event that commonly incurs injury to both mother and infant? Why is it that modern childbirth usually requires some kind of surgical intervention? By this I refer not only to outright surgeries, but also to the various manipulations and forcing measures that are so often employed in so-called "natural childbirths." It is vitally important to realize that under normal conditions, childbirth requires absolutely no intervention whatsoever. "Catching the baby" should be all the attendant has to do. Performing manual rotations, either internally or externally, manipulating the shoulders, guiding the head, stretching the perineum and other related procedures are in no way a normal part of the birth process. If we consider that humans in the remote past, living in a state of nature, had no understanding of the mechanics or the intricacies of birth and were therefore unable to constructively intervene during labor, we must conclude that Nature intended birth to be an entirely spontaneous process. This is certainly true of animals in the wild, who give birth unassisted. No doubt it was also true for women.

An entirely normal and natural childbirth occurs so rarely in this country that it is actually an oddity. By medical standards, anything less than a Caesarean section or a forceps delivery is considered a "natural" birth. No matter how much pain the woman suffers, no matter how prolonged the labor, no matter how much damage is done to the birth canal, whether or not the infant is battered, whether or not difficulty is encountered in obtaining the placenta and no matter how much meddling is necessary in order to accomplish the birth, as long as a major operation is avoided, the birth is considered "natural."

I attended a childbirth class once where a woman who had recently given birth at home was relating her experience. It seemed that she had succeeded at having a "natural" childbirth, even though she was in

labor for over two days, even though tremendous fundal pressure was finally required in order to expel the infant (this entails pushing downward on the uterus through the abdomen to force the baby through the birth canal), even though she was given injections of pitocin (to stimulate uterine contractions), and despite the fact that extensive tearing occurred. Yet, she did avoid being admitted to the hospital, and therefore felt that she had indeed accomplished a natural childbirth. Her last comment was that, "it was a wonderful experience and I would encourage any woman to have a natural childbirth at home." Quite frankly, it all sounded less than wonderful to me and I didn't see how she could expect the other women to eagerly look forward to such a trying experience.

Natural childbirth and home deliveries are very popular today, and the demand for competent home birth attendants is greater than the supply. "Prepared childbirth" classes are being taught in the homes, schools and even in the hospitals. Thorough preparation, we are told, lessens the risk of complications in labor and delivery. We of the Hygienic School have no argument with this statement, but we insist that the most important aspect of this preparation should be achieving a high level of health. More important than learning the mechanisms of birth, more important than practicing breathing routines, and more important than securing sterile sheets and towels, is the attainment of superb health. If a woman begins labor in poor physical condition, the process of giving birth is apt to be an agonizing and grueling ordeal despite adequate preparation, in the usual sense of the word. In contrast, a woman who knows nothing about birth, but who arrives at term in splendid form and exemplary condition, is likely to have an easy and joyous experience in childbirth.

In saying that health is the most important prerequisite for success in childbirth, we imply that truly adequate preparation must begin well in advance of pregnancy. To stop smoking and drinking (alcohol), to cease eating refined foods, to avoid salt, to shun all drugs, to secure sufficient rest and sleep—these will prove to be highly beneficial to the woman who has conceived. But, why wait until conception to stop injuring yourself and to begin to thoroughly supply your body with its needs? Why not acquire high level health before becoming pregnant and thereby provide your unborn child with a perfect internal environment from the moment of its conception? Waiting until pregnancy begins is often too late to achieve one's desired health goals. The body does not suddenly become well nourished, suddenly become cleansed or suddenly become physically conditioned. These are physiological processes that take time. Furthermore, pregnancy often limits the full application of Hygienic measures. A pregnant woman cannot fast, except for short periods. Although I know of several women who have fasted for as long as two weeks at the beginning of pregnancy, with good results, I would not advise such fasting in the vast majority of cases. Pregnancy also limits a woman's prerogative to lose weight and physically condition herself. Building health is something that should be avidly pursued years before conception.

Poor health and poor conditioning cause most of the problems that occur during pregnancy. Pre-eclampsia and eclampsia (toxemia of pregnancy) are the direct result of unhygienic practices during pregnancy. This condition, characterized by some degree of edema (swelling), high blood pressure and albuminuria (protein in the urine) is caused by the consumption of large amounts of protein, particularly animal protein, the use of salt and the ingestion of drugs. I would state unequivocally that it is entirely avoidable in virtually all cases if a Hygienic regime is followed.

Malpositions of the fetus, which can impede or suspend the birth process, can also be related to the overall maternal condition. The fetus may assume a transverse lie (which is impossible to deliver naturally) because the tone of the uterine walls is not adequate to force the head downward. Ordinarily, the uterine muscle supplies enough resistance to allow gravity to draw down the heaviest portion of the fetus, which, of course, is the head. However, when the muscle tone of the uterus is weak, the organ may "give" abnormally, resulting in a transverse position of the fetus. Such incidents are often regarded as "accidents" when they are really a matter of cause and effect.

Dystocia, or prolonged labor, is often the result of cephalopelvic disproportion, wherein the fetus is literally too big to readily negotiate the birth canal. Most often this results from excessive weight gain during pregnancy which produces an overly large infant and an overly fat mother. Hygienists have long emphasized that a small, light infant represents the biological norm for humans at birth, as it does for

other animals. A birth weight within the six-pound range is ideal. Yet, today, it is not uncommon to encounter births in which the weight of the newborn is 8, 9 or even 10 pounds. Such oversized, fat-encumbered infants are not healthy. They often injured in the birth process. The tendency toward flabbiness and bloatedness will in some cases persist indefinitely.

Excessive weight gain during pregnancy is the result of overeating. Too much food is generally recommended at natural childbirth classes, particularly in regard to high-protein foods. A pregnant woman actually requires only slightly more food than she would require under ordinary circumstances. If we assume that a woman gains approximately 20 pounds over the course of a normal gestational period of 280 days, this would amount to a weight gain of slightly more than one ounce per day, on the average. How much additional food does it require to gain an ounce a day? Quite obviously, not very much.

There is no reason to overemphasize proteins in the diet of a pregnant woman. The protein density of the fetus is actually less than that of the mother. Assuming that she is eating a diet of whole natural foods, largely or wholly uncooked, she will easily obtain the additional protein she needs by increasing her overall food consumption proportionately. Too much protein places a great stress upon the liver and kidneys. Since a pregnant woman already has the burden of eliminating the fetal waste products in addition to her own, it is foolish to add to this burden by overeating on proteins.

William's *Obstetrics* provides the following information about maternal weight gain during pregnancy:

"During a normal pregnancy with a single fetus a weight gain of nearly 18 pounds can be accounted for on the basis of obvious pregnancy-induced physiologic changes. They include an increase of almost 11 pounds of intrauterine contents accounted for by fetus (7 1/2 pounds), placenta (a little over 1 pound), and amniotic fluid (2 pounds), in addition to a maternal contribution of 7 pounds accounted for by increase in the weights of the uterus (2 pounds), blood (3 1/2 pounds), and breasts (1 1/2 pounds). The moderate expansion of the volume of interstitial fluid in the pelvis and lower extremities directly attributable to the increased venous pressure created by the large pregnant uterus is a normal event. In the ambulatory woman it most likely adds 2-3 pounds more. There is, therefore, a physiologic basis for a maternal weight gain of about 20 pounds."

In the case of a Hygienically-conducted pregnancy with a smaller birth weight infant, these figures would be correspondingly lower. This is particularly true in regard to the amount of maternal fluid retention. Most women experience a slight to moderate degree of edema during pregnancy which has come to be accepted as normal. For a Hygienic woman whose weight is normal before pregnancy, we can assume a gain of about 18 pounds represents the physiological ideal. Yet today we find women gaining 30, 40 and more pounds during pregnancy with the blessings of their physicians. These women are fat, bloated, overly distended and often hypertensive. They experience shortness of breath, backaches, constipation, difficulty sleeping and difficulty walking. During their long and trying labors they suffer tremendously and often require intervention of one kind or another in order to facilitate birth. Malpositions of the fetus (such as occiput posterior) is common among this group. Their babies, too, are fat and bloated. It is impossible to look at these women at term without sharing their distress. A pregnant woman should look absolutely radiant, but these women look tired and disabled. It is no wonder that in modern times pregnancy has come to be regarded as a disease and childbirth as a surgical operation.

Exercise during pregnancy is another controversial issue. All childbirth instructors give their prospective mothers exercises to do, but in most cases these exercises are not vigorous enough to adequately condition the woman. Doing one or two deep-knee bends and tilting the pelvis in various ways hardly constitutes a thorough physical conditioning program. It behooves every pregnant woman to strengthen the muscles of her abdomen, back, thighs and buttocks. Squatting is an excellent exercise during pregnancy, particularly since women give birth in the squatting or semi-squatting position. Doing 50 or more deep squats with the legs spread and the feet turned out will develop the muscles of the thigh and

back while at the same time stretching the adductor muscles on the inside of the thighs. Sit-ups or partial sit-ups will develop the abdominal muscles and these can be done safely throughout pregnancy. It is best to perform this exercise with the knees raised to avoid unnecessary strain on the lower back. Leg lifts can be performed lying on the back either outside on the lawn or indoors on the carpet. This will develop the psoas muscles and the lower abdominal muscles. The adductor muscles can be strengthened by assuming the "lotus" position (feet drawn up, heels together, knees apart). Place your hands on the outside of your knees and then try to lower your knees to the floor as you exert enough resistance with your hands to make it difficult. Having your husband or "labor coach" provide resistance is also a good way of performing this exercise. A good stretching exercise can be performed by holding on to a doorknob with one hand and then swinging the opposite leg and thigh in an arc from side to side like a pendulum. Then the exercise would be repeated on the opposite side. These and other calisthenics should be performed repeatedly in order to achieve a high level of fitness. Walking on all fours (on your hands and feet, not hands and knees) is an excellent exercise that works a broad spectrum of muscle groups. Jogging, bicycling, swimming and brisk walking are outstanding "aerobic" activities and there is no reason why a pregnant woman cannot fully participate in these wholesome sports. Consider what Dr. Bradley says in *Husband Coached Childbirth* about the prospect of injuring the fetus through vigorous activity:

"Dismiss from your mind the idea that if your pregnant wife fell down skating, skiing, or whatever, that she would hurt her baby. Of course, if she doesn't know how to fall correctly she can hurt herself—just as she could when she's not pregnant. In my career I have never known a mother to have harmed a baby by an external trauma. The salt water (amniotic fluid) in which the baby is floating equalizes local pressure. This idea of falling down and thereby losing a baby is a superstition that probably began with the movie *Gone With The Wind*. Rhett Butler gave his wife a shove at the top of the stairs. She gracefully tumbled down the stairs and conveniently had a miscarriage at the foot of the stairs. Immediately thereafter doctors' offices and hospital emergency rooms were mobbed with out-of-wed-lock pregnant women who were battered black-and-blue and sore but still very much pregnant! It won't work."

Remember that exercise has a toning effect on involuntary muscles as well as voluntary muscles. A hypotonic uterus, either during or immediately after labor, is not likely to occur in a woman who is in prime athletic condition. So, get out and exercise during pregnancy and gradually acquire the strength, endurance, and flexibility that will serve you admirably during labor and delivery.

The dietary needs of a pregnant woman are not radically different from her needs under ordinary circumstances but the consequences of dietary deficiencies are more profound. An abundance of raw foods should be eaten, including fruits, vegetables, nuts, seeds and sprouts. Green leafy vegetables are particularly important. Two large salads per day should be the rule. An overly restricted diet should be avoided. A woman who has been eating the conventional mixed diet should not abruptly switch to an exclusive diet of raw fruits, nuts and vegetables during pregnancy. Although a completely raw food diet is the ideal, a woman who is unaccustomed to it might not be immediately capable of extracting and assimilating a complete array of nutrients from it.

It is unnecessary and undesirable to saturate oneself with "food supplements" during pregnancy. Large amounts of calcium, in particular, are usually foisted upon pregnant women, ignoring the fact that the skeleton of the fetus is largely cartilaginous.

In Oregon, where I attended home births with a naturopathic doctor I saw several instances of calcific deposits in the placenta. a pathological condition, in every instance, dolomite or some other calcium supplement had been administered. I have never witnessed this in cases where only food comprised the diet of the mother. It is possible that these abnormal calcifications can affect the circulation to the fetus. My advice is to add the dolomite to your garden soil and then grow green leafy vegetables. This will provide calcium in a usable form that will never cause harm.

There are certain Hygienic considerations that we may wish to note regarding the conduct of labor. For many years, elaborate and complicated breathing patterns were popular among natural childbirth circles. Chief among these was the Lamaze method. Fortunately, these methods are coming into disrepute. Remember that breathing is an automatic process and that whether you are eating, sleeping; running, or giving birth, your body is fully capable of regulating its own respiration. Hyperventilation is the most obvious danger of these forced breathing routines.

Until the cervix is fully effaced and dilated, the woman should simply try to relax. Premature pushing is likely to cause injury to the birth canal and may exert unnecessary pressure on the fetal head. Deep, slow, relaxed breathing is all that is necessary during the first stage. There is no need, however, for the woman to remain recumbent. Dr. Robert Caldeyro-Barcia of the American College of Obstetricians and Gynecologists reported recently that "the efficiency of the contractions is greater in the upright position. The greater efficiency combined with the increased force of gravity, and more advantageous drive angle between the fetal and maternal spines results in significant shortening of the first stage of labor."

Walking about between contractions during the first stage of labor has a gently stretching effect upon the uterine cervix while it also serves to ease tension on the mother-to-be.

In a Hygienically-managed pregnancy, the most likely consideration during the second stage of labor (the actual expulsion of the baby) is how to avoid a precipitous delivery. It is often necessary to discourage a woman from pushing so as to avoid causing vaginal or perineal tears. Having her lie down also helps to slow down the birth, should this be necessary.

Although it is best to avoid bright lights, it is equally unwise to try to give birth in the dark (or nearly so). A very good friend of mine practically lost his son at birth because dim lighting prevented him from immediately recognizing an asphyxiated condition. Provide enough lighting so that the birth attendant can readily observe the progress of the birth, the condition of the mother and the condition of the infant.

The Leboyer bath has become a very popular adjunct to a natural childbirth. Without objecting to this procedure, I hardly think that it is as indispensable as its proponents would lead us to believe. Why try to stimulate uterine conditions for an infant whom Nature has deemed ready to function in the outside world? It seems to me that being cuddled and carressed on mother's soft tummy is every bit as reassuring as a bath.

The experience of my dear wife Margaret would serve as a fitting example of the efficiency of Hygienic methods during pregnancy and childbirth. Margaret had a joyous pregnancy during which she engaged in vigorous physical exercise on a daily basis. The very day her labor began she went out running. She experienced no backaches, no nausea, no vomiting, no swelling and no shortness of breath. Her weight gain was 18 pounds. She gave birth naturally at home and from the first true labor contractions to the birth of the placenta, all of 3 1/2 hours elapsed.

She suffered some pain with her first stage contractions but claims that it "felt good" to push the baby out. Mark Shelton Cinque was born at 3:00 a.m. on May 12, 1974, weighing 6 pounds, 4 ounces. He was unusually bright and alert from the moment of his birth, as he has continued to be in the five years he has been with us.

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Article #2: Feeding Mothers by Herbert M. Shelton

It is a common adage that the pregnant mother must eat for two. Unfortunately, this adage is likely to be

interpreted to mean that she must overeat and not be interpreted to mean that she should eat foods that meet the nutritive requirements of both herself and the evolving child. The influence of the mother's diet upon her unborn child is not sufficiently appreciated by women and their advisors. The newborn baby requires but half a pint of milk daily which is chiefly water. It is unlikely that the food needs of the unborn are greater than those of the newly born. There would, thus, seem to be no need for so much extra food before birth. The great demand of the unborn for nutriment would seem to be fictional.

Of old it was said: "The fathers have eaten sour grapes and the children's teeth are set on edge." Paraphrasing this ancient statement, we may say today that the mothers have eaten white bread and the children's teeth have holes in them. Many of the defects and deformities with which children are born today are direct results of a faulty diet eaten by mothers. What are called larval deficiencies are responsible for many defects in development.

Nutritional influences upon the development of the new being are commonly thought to start at conception, but there are myriads of facts that show conclusively that they begin much before this time. It is true that soft and malformed bones are not to be blamed upon a drunk father, except insofar as he fails to supply adequate nutriment for the mother during her pregnancy; but the gleam of health in the eyes of a two-year-old does not come from the grandfather and a bar of chocolate candy. It comes from fruits, green vegetables, nuts and whole natural foods. Nutrition begins with life and does not cease until death puts an end to all the life processes.

Pregnant women are urged to take plenty of milk and eggs and are often given calcium tablets; for, despite the fact that the bones of the baby will remain soft, no matter how much excess calcium the mother takes, the embryo is supposed to need lots of calcium for other purposes. So urgent is the demand for calcium that a mother's teeth and bones will be robbed to supply the needs of the unborn baby if her diet does not contain enough of it. This fact, however, does not demand that the pregnant woman should fill up on great quantities of milk, overeat on eggs and take the nonusable calcium supplied by the drug store. It means, rather, that she should eat whole, unprocessed foods—fruits and vegetables—and cease trying to nurse herself and her baby on white bread, white sugar, white rice, canned fruits and vegetables and other foodless "foods." The cow does not drink lots of milk and eat lots of eggs to provide herself and her calf with calcium. The calcium in her milk is not derived from these sources.

When it is considered that it is pasteurized milk which pregnant and nursing mothers are advised to drink in such quantities and that this milk is taken together with white bread, denatured cereals, cakes and pies, coffee and tea, chocolate and ice cream, candy and soft drinks, flesh and eggs, white sugar, canned fruits and vegetables, all jumbled together in the most haphazard and heterogeneous combinations, and that very little wholesome food is to be taken, it does not take much imagination to grasp the fact that both mothers and unborn babies are inadequately nourished.

It is understandable that women who eat such a diet, while pregnant, overeat in an effort to meet their nutritional needs. But this overeating leads to additional troubles, such as indigestion, morning sickness, constipation, hemorrhoids, swollen ankles, varicose veins, overdistension of the abdomen, a fat baby and difficult delivery. We have been conditioned to think that a fat baby is a well-nourished baby, although we know that fat at other ages of life is not a sign of good health and is not a desirable acquisition. The young of the mighty gorilla, which attains a size considerably larger than that of the largest man, weighs three pounds at birth. Some day, when we have learned to appreciate the value of proper nutrition, we will come to realize that the human infant should weigh three to five pounds at birth. Today we are very happy if the baby weighs eight to ten pounds. A ten-pound baby may be said to be five pounds of baby and five pounds of fat. Such a baby begins life with a handicap.

Many unborn babies are so "well nourished" that they weigh eight, nine, ten and more pounds at birth. This large size results in difficulties of delivery. Often instrument deliveries are performed. Due to their large size, fat babies are often injured in being born, these injuries rendering them liable to brain and cord inflammation. These "well nourished" babies are also prone to have trouble in teething, often

throwing them into convulsion. When such babies and children are subjected to any enervating influence, such as prolonged heat of summer, they are likely to develop serious diseases.

The expectant mother, desirous of doing the most possible good to her unborn child, will avoid tobacco, alcohol, tea and coffee, and drugs as she would a rattlesnake and provide her offspring with the best possible food. Instead of the commonly-eaten processed and refined foods, canned, pickled, and spiced delicacies, she will provide herself with a more abundant supply of fresh fruits and vegetables, these largely, if not wholly, in their raw or uncooked state. These foods will provide for both the mother and the unborn baby an abundance of minerals and vitamins and of high-grade proteins. She will eat other protein foods, but eat them in moderate quantities and not stuff on them, as is the common practice. It is normal to seek a sense of repletion after eating, but this repletion should be secured by consuming more bulky foods and not be overeating on concentrated proteins, starches and sugars. Fruits and vegetables make the ideal foods with which to secure the sense of repletion.

It is quite true, as we indicated at the beginning of this article, that the pregnant mother must eat for two; but it is almost never true that she is required to increase her food intake. So nearly universal is the practice of overeating that most women eat enough for two at all times. To increase the food intake because one is pregnant may mean to take from three to five times as much food as is required. When we consider that the average gain per day of the human fetus, from conception to birth, is less than a half an ounce a day, we can readily understand that the commonly advised overeating is very unwise. There is ample evidence to show that the body makes more economical use of food during pregnancy than at other times, so that instead of increasing the food intake, it is often possible to decrease the amount of food eaten with benefit both to the mother and the unborn child. It has been observed that among animal mothers, even though they may bear more than one young at a time, there is little or no increase in food intake during pregnancy. Animal mothers may reduce their physical activities, but rarely increase their gastronomic activities.

It should come as no surprise to learn that many modern mothers have reared large families while adhering closely to the two-meals-a-day plan, for this was the almost universal practice in the past, when families were usually larger than at present. That woman who has been accustomed to eating but two meals a day will have no trouble in supporting both herself and her growing infant without the addition of a third meal.

The most important factor in the nutrition of the pregnant mother is not the quantity of food she eats, but its quality. She should not eat more food, but better food—more lettuce and celery and fewer potatoes; more apples and grapes and less flesh; more oranges and peaches and fewer eggs; more natural foods and no denatured foods. Such a diet will provide for adequate development and growth of the unborn child—for better eyes, better bones, better teeth, a better nervous system, and better tissues generally.

We cannot think wholly of the improvement that such a diet provides for the unborn child. We are justified in thinking also of the improved health and greater comfort of the pregnant woman and the grater ease of delivery. This diet also provides for a more certain, a more abundant and a more adequate milk supply when the child is born. It is a fortunate fact that the diet which is best for the unborn child is also best for the expectant mother and that the diet which best promotes the health of the one will also best promote the health of the other.

The expectant mother, desirous of maintaining high-level health during pregnancy and providing adequate nourishment for her unborn child, will not only eat a diet of natural foods, but she will eat this diet in a way to secure the best digestion and the most efficient utilization of her food. This is to say, she will observe all the rules of food combining and all the rules for eating. She will not eat if she is not hungry and she will not eat if she is physically distressed or emotionally disturbed. She will not eat if fatigued, but will rest first. She will not drink with meals nor soon thereafter. She will eat in moderation and without fear that in doing so she will injure her offspring.

Article #3: Prenatal Life by William L. Esser

In considering the hygienic life of a child, we must begin at the beginning. The belief that a child is born when it separates from its mother and becomes physiologically independent is erroneous. Life begins at conception, when male and female cells unite and the marvels of creation begin anew. But we should even go back several generations if we wish to consider the influences which bear on the life of the individual.

The child is fated through its whole earthly existence to endure or enjoy, as the case may be, the conditions which the good or bad qualities of its parents have forced upon it. Smoking, drinking, sexual excess and other inordinate practices may not outwardly be seriously affecting the health of adults, but when their children become nervous, epileptic and subject to all the pathologies to which mankind has descended, they may seriously contemplate the seriousness of their weaknesses.

Though the seeds of both parents are vital in influencing the future of the child, it is the mother who after initial union must assume the delicate responsibility of making its first nine months perfect. Nature has appointed woman to the mission of motherhood and by this mission she is directly charged with the early life of the child upon which so much of future good or ill depends. The rights of children begin while they are still in fetal life. Not by any will of their own do they come into existence.

Children are what parents make them. Children in later life are often condemned and punished for things for which parents are directly responsible.

Though it should be unnecessary to mention it, there are still those who harbor superstitions in connection with influences during pregnancy. It is thought that if the mother hears beautiful music while carrying her child it will develop into a musician, or that if she reads or thinks about certain favorable subjects, the child will have favorable tendencies in the particular field desired. It is desirable that the mother be surrounded by beautiful things, lovely music, inspiring books, because these things all contribute to poise and health, but listening to the moving passages of a Wagnerian masterpiece will not develop a little Wagner any more than looking at a Ford automobile will make a budding automotive genius out of little junior. These superstitions are just as untrue as the belief that the sight of a rat will cause a brown mark on his forehead, or that baby will certainly be an idiot because mother happened to see a case of insanity sometime after conception.

Russel T. Trall, M.D., has this to say for the expectant mother: "Motherhood should be normal. But it never will be and never can be under the prevailing fashions of society. A man might as well drink intoxicating liquor and then endeavor to walk erect with face upturned to Heaven, without gibbering or staggering, as a woman expects to eat, drink, cress and dissipate in the fashionable ways and be the mother of healthy offspring.

"One of the pernicious errors abroad is that woman is the 'weaker vessel' physically; thus accounting for, if not excusing, her manifold infirmities. Fashion is justified and nature blamed. This doctrine has its origin in viewing 'woman as she really is,' and not 'woman as she should be.' The fact that woman in civilized life is, as a rule, feebler than man is taken as evidence of constitutional and natural infirmity.

"There is no truth to this notion. Physically woman is man's equal. In bodily stamina, powers of endurance, vital resources and muscular strength, under the same circumstances of habit and education, she is no sense inferior; on the contrary, if there is a difference, it is in her favor. This should be so; and there is an anatomical and a physiological reason why it is so. The woman has not only to nourish herself but others. She must construct and replenish her own structures and those of her offspring. Hence she has the greater nutritive apparatus."

A woman living a rational life free from superficialities will have a normal, painless pregnancy and

labor. The labor will be painless without the use of anesthesia and the abusive treatment of hospitalization. There are occasionally cases of badly formed pelvises which no amount of perfect living can alter, in which a certain amount of pain cannot be avoided. It is more important in these than in any that the patient live as closely to the laws of health as possible.

A pregnancy fraught with the usual discomforts, sickness and painful labor is simple to avoid. Mothers should live as close to their usual routine of duties as possible. This applies, of course, to women in the home rather than those who are working in defense plants and under other types of stress. A woman carrying a child should not be engaged in laborious occupations where she cannot rest when the inclination is there, and where she is subject to the vicious emotions of jealousy, hatred, deceit, etc. A poised, serene, self-controlled disposition should be cultivated. The atmosphere of the expectant mother should be one of quiet and refinement, one of happiness and love, and the husband should assist his wife in supplying that medium.

The unborn baby must have as perfect a home as possible. Its food supply which it receives from its mother's bloodstream should be clean and laden with rich nutriment for perfect growth. Hence the mother must take great pains to eat only the best food, in the best combinations and in the amounts best suited to her needs. Though it may sound like repetitious record, it is nevertheless important to stress the importance of not "eating for two" since the habit seems to be just as prevalent as always. A fat baby is diseased and because of its size will cause an uncomfortable pregnancy and a painful labor. Under normal circumstances a child's weight should be no more than six pounds at birth.

The child in the womb should have freedom of movement and for this purpose, the mother should allow her body all the freedom from dress that convention allows. She should dress comfortably and wear no tight garments of any kind. Her shoes should be low-heeled, or better still, have no heels at all. Whenever possible barefooted walking is good.

Sun-baths should be a regular part of the prospective mother's program. The sun creates vital changes in the body for the child and mother, improving the tone and vigor of the body. Women living in the north where the sun is scarce must be certain to expose themselves at every opportunity to insure at least a minimum amount. It is because of the need of sunshine that Dr. Herbert M. Shelton in *Care of Children* urged that babies be born in the spring. He writes as follows, "Babies born in the late fall or early winter, and who live through the winter, nearly all develop rickets to a greater or lesser degree. Fewer cases of rickets are seen in children who have the advantage of sunshine and sun-kissed food during their first months of life. That sunshine is absolutely essential to the normal assimilation and utilization of calcium (lime) and perhaps also of iron and other elements, is certain. This is true of plants, animals and man. If your child is born in the early spring or the closing of winter, it need never have rickets and will also have reasonable assurance against scrofula, tuberculosis, anemia and other diseases."

Exercise should be regular. Dancing, calisthenics, golf, hiking, tennis, swimming, if the water is not too cold, can and should be indulged in with care until the end of the pregnancy.

It should hardly be necessary to state that smoking, the use of alcoholics, coffee, cola drinks, and other suicidal habits must be outlawed. If a woman cannot make these sacrifices for her baby and for her own improvement, she certainly does not deserve the right and honour of having a child. These vicious habits make the mother a neurotic and the poor child nervous and irritable. There, can be no compromise.

Sexual abuse is a common and dangerous occurrence during pregnancy. Miscarriages are not infrequent and the abortion habit is often the result of this cause. It' is not uncommon to have expectant mothers forced into submission to this unnatural practice with threats of infidelity.

John H. Tilden, M.D. says. "The stockman, as well as the humane society, would prosecute anyone ignorant and stupid enough to allow the males of any breed of animals to tease and excite sexually the pregnant females; but this health destroying practice is permitted without protest among human animals."

The very least the husband can do is to cooperate with the mother of his child in this matter and other

conditions pertaining to her's and the baby's health. He must consider that she is making much greater sacrifice in the deal than he, and that a little self control and a less stimulating mode of eating and living will reduce his rapacity and improve his health.

The Hygienic mother has nothing to fear. The parturition will be painless and the newborn babe blessed with the health and promise every proud parent wishes it to possess. Home or a hygienic institution are the best places for the birth to take place. Likewise, a midwife, if obtainable, is the safest practitioner to have present at the time. The hospital and its brutal methods of hastening the parturition with drugs, anesthesia, forceps, and Caesarian section (the latter being routine procedure in some establishments) should be avoided with rightful dread. Here, everything is anti-natural. The birth of a child is treated as though it were the removal of a cancer instead of a perfectly normal, completely physiological, function.

The hospital mother is rarely capable of performing the most important function for her child after it is born; namely, that of lactation, of nursing it at her breast, because of the destructive medical procedure. If she can, the milk has invariably been made unfit for the same reason and rarely lasts beyond the fourth or fifth week. To the hygienic mother, these are all nightmares and disappointments she will never experience.